

The Integrated Policy and Plan to Provide and Improve Access to MH/MR/SA Services for Children, Adolescents and Their Families

***(Budget Item 329-G, As Amended in the 2002 Appropriations
Act)***

September 3, 2003

**Department of Mental Health, Mental Retardation and Substance
Abuse Services**

BUDGET LANGUAGE (329-G)

“The DMHMRSAS, the Department of Medical Assistance Services, and the Department of Juvenile Justice Services, in cooperation with the Office of Comprehensive Services, Community Service Boards, Court Service Units, and representatives from community policy and management teams representing various regions of the Commonwealth, shall develop an integrated policy and plan, including the necessary legislation and budget amendments, to provide and improve access by children, including juvenile offenders, to mental health, mental retardation and substance abuse services. The plan shall identify the services needed by children, the cost and source of funding for the services,

the strengths and weaknesses of the current delivery system and administrative structure, and recommendations for improvement. *The plan shall examine funding restrictions of the Comprehensive Services Act which impede rural localities from developing local programs for children who are often referred to private residential treatment facilities for services and make recommendations regarding how rural localities can improve prevention, intervention, and treatment for high-risk children and families, with the goal of broadening treatment options and improving quality and costs effectiveness. The DMHMRSAS shall report the plan to the Chairmen of the Senate Finance and House Appropriations Committees by June 30 of each year.*

PARTICIPANTS

- **DMHMRSAS**
- **DMAS**
- **OCS**
- **DJJ**
- **DCJS**
- **VDH**
- **DOE**
- **VML**
- **VACSB**
- **DSS**
- **6-7 PARENT REPRESENTATIVES**
- **CCCA**
- **VACO**
- **DRS**
- **PACCT**
- **ACTION ALLIANCE**
- **COY**
- **VA. SUPREME COURT**
- **VOPA**
- **VA. SECRETARY OF HHR**
- **CSU REPRESENTATIVES**
- **CMPT REPRESENTATIVES**
- **NAMI-VA**

ACTIVITIES IN FY 2003

- **Five meetings of the full group were held.**
- **DMHMRSAS hired a facilitator to assist the planning group in defining the role and future work.**
- **From this process, the planning group identified the characteristics of an integrated system of mental health, mental retardation and substance abuse services for children.**

CHARACTERISICS OF AN INTEGRATED SYSTEM

- **EASY ACCESS, FREE OR SLIDING FEES;**
- **CENTRALIZED ACCESS TO INTAKE ASSESSMENT, TURF NEUTRAL;**
- **CASEMANAGERS OPERATING ACROSS SYSTEMS;**
- **TRANSITIONAL CARE MANAGERS TO GUIDE FAMILIES THROUGH THE SYSTEM;**
- **BALANCE BETWEEN SERVICE PROVISION AND ADMINISTRATIVE REQUIREMENTS;**
- **CENTRAL GOVERNANCE FOR POLICY, PROCEDURES, DIRECTION AND INFORMATION COLLECTION WITH EVIDENCE BASED PRACTICES;**

CHARACTERISTICS OF AN INTEGRATED SYSTEM

- **FOCUS ON EARLY INTERVENTION/PREVENTION;**
- **FOCUS ON TREATMENT SERVICES THAT ARE NOT CRISIS ORIENTED;**
- **BETTER TRAINING AND PAY;**
- **CHILD AND FAMILY FOCUSED, STRENGTHS-BASED SERVICE DELIVERY;**
- **CHILD AND FAMILY INVOLVEMENT IN ALL LEVELS;**
- **NO WRONG DOOR: CLEAR POINT OF ACCESS;**
- **ADEQUATE RESOURCES;**
- **FLEXIBLE FUNDING STREAMS;**
- **CULTURALLY COMPETENT;**
- **RESTRUCTURING OF CHILD SERVING AGENCIES**

**PARTICIPANTS BELIEVED SUCH
A VISION COULD BE ACHIEVED IN
2 TO 15 YEARS**

ACTIVITIES IN FY 2003 (Cont'd)

- **Four subcommittees addressed specific areas (from budget language):**
 - **Services**
 - **CSA Rural Funding**
 - **Administrative Structure**
 - **Cost and Funding for Services**
- **Recommendations from these workgroups are in the plan.**
- **Eight broad recommendations were made.**

RECOMMENDATION 1

DMHMRSAS should initiate a budget request to fund an integrated continuum of mental health, mental retardation and substance abuse services for children, adolescents and their families. The budget initiative shall give consideration to the varying geographic needs in Virginia, filling identified gaps, addressing co-occurring disorders and the needs of special populations such as children with early development needs, young juvenile sex offenders, and adolescents in need of transitional services into the adult services system.

Status: The Department will incorporate unmet service needs for children into the 6-year Comprehensive Plan now under development . DMHMRSAS has also organized a Child & Adolescent Special Populations Workgroup as part of Restructuring.

RECOMMENDATION 2

The Department should initiate a budget request to fund a determined number of dedicated integrated case managers for children and families for all community service boards/behavioral health authorities.

Status: The Department will integrate this recommendation into the 6-year Comprehensive Plan process now underway.

RECOMMENDATION 3

The DMHMRSAS should explore existing resources within state and federal funds to provide statewide training on mental health, mental retardation and substance abuse services and in integrated case management as related to the recommended continuum of mental health, mental retardation and substance abuse services for children, adolescents and their families. All agencies within the Secretariats of Education, Health and Human Resources and Public Safety shall cooperate in the planning and funding of the training.

Status: An action plan for this recommendation will be developed by the 329-G Committee at the Fall meeting.

RECOMMENDATION 4

- A. DMHMRSAS, in conjunction with CSBs and BHAs, should request a dedicated pool of flexible funds to be used specifically for program start – ups and program development, allocated in a manner that maximizes flexibility in program design and promotes achieving specific outcomes for children, adolescents and their families with mental health, mental retardation and substance abuse needs.**
- B. DMHMRSAS, in conjunction with CSBs and BHAs, should establish a cooperative agreement with a state university to evaluate the efficiency of such programs based on terms established by the DMHMRSAS.**

Status: The 329-G committee will develop an action plan for this recommendation at the Fall meeting.

RECOMMENDATION 5

DMHMRSAS should establish an integrated organizational unit that merges existing staff providing child, adolescent and family services into one unit. This organizational unit shall report to the Assistant Commissioner of Community Services. The unit should provide leadership for child and family issues on a statewide basis through coordination of services delivery and integration of disability service systems, with the goal of improving access to mental health, mental retardation and substance abuse services for children, adolescents and families in Virginia.

Status: The Department supports this recommendation and is currently examining funding and related human resource issues.

RECOMMENDATION 6

DMHMRSAS should establish a state advisory committee for child and family services to support activities of the organizational unit in Recommendation 5.

Status: Pending action on Recommendation 5.

RECOMMENDATION 7

DMHMRSAS should seek ways to build and link the network of parents of children and adolescents with mental health, mental retardation and substance abuse service needs.

Status: The 329-G committee will develop an action plan for this recommendation at the Fall meeting.

RECOMMENDATION 8

DMHMRSAS should create, publish and fund an interactive website to be used as a resource for children, adolescents and families to enable improved access to mental health, mental retardation and substance abuse services, providers, educational resources and supports.

Status: The 329-G committee and DMHMRSAS will develop an action plan to implement this recommendation.

NEXT STEPS

- **Tentative dates for the Workgroup meetings in FY 2004 are:**
 - September 18, 2003**
 - December 18, 2003**
 - March 18, 2004**
 - June 17, 2004**
- **The 329-G Planning Committee will assume an advisory role to the Department relative to implementation of the recommendations.**

***Questions or concerns may be
addressed to:***

**Pamela Cooper 804-371-2183
pcooper@dmhmrsas.state.va.us**

or

**James Martinez 804-371-0767
Jmartinez@dmhmrsas.state.va.us**